MEDICAID SERVICES MANUAL TRANSMITTAL LETTER

April 14, 2009

MEMORANDUM

TO: CUSTODIANS OF MEDICAID SERVICES MANUAL

FROM: NOTATION A. LIVERATTI, CHIEF, COMPLIANCE

SUBJECT: MEDICAID SERVICES MANUAL CHANGES

CHAPTER 2700 – HOME AND COMMUNITY-BASED WAIVER (HCBW) FOR THE ELDERLY IN ADULT RESIDENTAL CARE

BACKGROUND AND EXPLANATIONS

Department of Health and Human Services, Centers for Medicare & Medicaid Services, Final Rule, published June 5, 2008 revised the existing conditions of participation that hospice must meet to participate in the Medicare and Medicaid programs.

The final rule clarified recipients of home and community based waiver programs who are enrolled or elect to enroll in a hospice program may be eligible for waiver services not covered under the hospice program to remain in the community. Since the Nevada State Welfare Division (NSWD) has changed their name to the Division of Welfare and Supportive Services (DWSS), references made throughout the chapter have been updated to reflect this change. These changes to the chapter are effective upon approval of the Public Hearing.

MATERIAL TRANSMITTED
MTL 08/09
CHAPTER 2700 – HOME AND
COMMUNITY BASED-WAIVER (HCBW)
FOR THE ELDERLY IN ADULT
RESIDENTIAL CARE

Sec. 2702.12 Added "(POC)"

Sec. 2703.1A

Added "6. Recipients of the Waiver for the Elderly in Adult Residential Care who are enrolled or elect to enroll in a hospice program may be eligible to remain on the waiver if they require waiver services to remain in the community. Close case coordination between the hospice agency and

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CHAPTER 2700 – HOME AND
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the waiver case manager is required to prevent any duplication of services. Refer to Medicaid Services Manual Chapter 3200 for additional information on hospice services." Added "7. Group Care Waiver Eligibility Criteria:"

Sec. 2703.1A

Sec. 2704.1 Added "REFERENCE"

Sec. 2705

Delete "7. Recipients of the Waiver for the Elderly in Adult Residential Care who then elect to enroll in a Medicaid or Medicare funded hospice program will no longer be eligible for the group care waiver program. If the recipient disenrolls from a hospice program, he/she may reapply for the Waiver for the Elderly in Adult Residential Care. Applicants for the Waiver for the Elderly in Adult Residential Care who are a recipient on a Medicaid or Medicare funded hospice program are not eligible to become a recipient of the group care waiver program unless they disenroll from the hospice program."

Delete "FORM"